## **APPLICATION FOR EARLY VOTING BALLOT**

Applicant's Name				For Election Authority's Use Only		
(please print)				Ballot Style:		
Street Address				Voter ID:		
City, Zip						
Date of Birth				For Election Ju	idge's Use	Only
Phone Number				Voter's Consecutive #		
E-mail				Consecutive #		
To be voted at the	CONS	SOLIDATED ELECTION		(Primary Only) I request a ballot for the:		
Date of Election		APRIL 4, 2023				Party.
Township and Precinct				Check here if you ballot (referenda		nonpartisan
ast day of which is the 14 <sup>th</sup> da I understand that thi application and that I must selection.	ny following elect s application is submit a separ rovided by law	lay, for counting no later than detion day.  made for an official early ballouse application for an official pursuant to 10 ILCS 5/29-10, the	t to be vo early ballo	ted by me at the elect ot to be voted by me	ion specifie at any sub	ed in this osequent
Signature of Applicant			_	Today's Date		
Address to wh should be n (if different fro	nailed:	Winnebago County Clerk				

Mail To:

Winnebago County Clerk
Election Department, Room 101
404 Elm St.
Rockford, IL 61101

OR email to: elections@clerk.wincoil.gov